IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Nabe et al.

Art Unit: 3623

Serial No.: 09/828,530

Examiner: Peter H. Choi

Filed: April 6, 2001

:

For: METHODS AND SYSTEMS

FOR SUPPLYING CUSTOMER

LEADS TO DEALERS

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:
Transmittal (3 pages); Amendment in Response to Office Action dated March 22,
2007 and made final, and Advisory Action dated August 20, 2007 (29 pages)

STATUS

2. Applicant claims small entity status. is other than a small entity.

EXTENSION OF TERM

3.	The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.								
		(complete (a) or (b), as applicable)							
Extension for response within: first month			Other than small entity Fee	Small entity Fee (if applicable)					
			\$ 120.00	\$ 60.00					
		second month	\$ 450.00	\$ 225.00					
		third month	\$ 1,020.00	\$ 510.00					
		fourth month	\$ 1,590.00	\$ 795.00					
		fifth month	\$ 2,160.00	\$1,080.00					
			Fee Due	\$ 450.00					
If a	n additional	extension of time is required, j (Check and complete the		ition therefor.					
		An extension of mo therefor \$ is deducted of extension now requested	ed from the total fee due t						
	Extension fee due with this request \$ 450.00.								
OR									
	(b) Applicant believes that no extension of term is required. However, t conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for ext of time.								

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has be	en calculated as shown below:
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,	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL. RATE FEE	OR	ADDITIONAL RATE FEE	
TOTAL		MINUS		=0	x \$9 = \$		x \$18 = \$0.00	
INDEP.		MINUS		=	x \$44 = \$		x \$88 = \$0.00	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$150 = \$	"	+ \$300 = \$	
			TOTAL ADDITIONAL	OR	TOTAL ADDITIONAL			
				FEE \$	<u></u>	FEE \$0.00		

				-	1	1	
				TOTAL ADDITIONAL	OR	1	ADDITIONA
-		-		FEE \$		FEE	\$0.00
	(a)	\boxtimes	No additional fee for Claims i	s required			
			OR				
	(b)		Total additional fee for claims	required \$			
			FEE PAYMI	ENT			
5.		Attacl	ned is a check in the sum of \$				
			e Deposit Account No. 01-2384 dicate of this transmittal is attac		<u>)</u>		
			FEE DEFICIE	NCY			
6.		If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.					ount No.
			AND/OR				
	\boxtimes	If any 2384.	additional fee for claims is req	aired, charge Deposi	it Acc	ount N	o. 01-
7.		Other	:				
			Re Al Or St	miel M. Fitzgerale g. No. 38,880 RMSTRONG TEAS he Metropolitan Squ Louis, MO 63102 4/621-5070			00